

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF MICHIGAN

Rev. Karl Hugh Childs,

Plaintiff,

vs.

Government of Canada

Consulate General of Canada

Suite 1100

600 Renaissance center

Detroit, Michigan 48243-1798

Halina Roznawski

Visa Officer

Robert Noble

Consul General

Government Of Canada

80 Wellington Street

Ottawa, Ontario K1A OA2

CANADA,

Defendant

Case:2:10-cv-10524  
Judge: Lawson, David M.  
MJ: Hluchaniuk, Michael  
Filed: 02-05-2010 At 04:12 PM  
CMP Karl Childs v Government of Can  
ada, et al (SMS)

**COMPLAINT**

COMES now Plaintiff Rev. Karl Hugh Childs to penetrate the veil of diplomatic immunity By  
Government of Canada Consulate General of Canada who is liable for specific intentional torts

1 such as assault of **Intentional infliction of emotional distress**, and negligent infliction of  
2 emotional distress. After 18 yrs of assault Plaintiff was refused outrageously by Robert Noble  
3 Consul General to attend his father-in-law's funeral to pay that last sad office of respect to bury  
4 the dead on January 27, 2010. This was the last straw to break the Camel,s back, and has left  
5 Plaintiff distraught and deeply mentally disturbed having nightmares about his father-in-law, and  
6 his son incarcerated in Canada. Who he was also denied to visit. Plaintiff has bad visions and  
7 constant dreams intermittent, for all his loved ones in Canada. Including cold sweats, pacing  
8 the floors and worries unimaginable, and endless longings to see his five children in Canada.

9

- 10 1. Defendant acted intentionally or recklessly; and
- 11 2. Defendant's conduct was extreme and outrageous; and
- 12 3. Defendant's act is the cause of the distress; and
- 13 4. Plaintiff suffers severe emotional distress as a result of defendant's conduct.

14 Violation according to The Federal Tort Claims Act, Title VI of the Legislative Reorganization  
15 Act of 1946, and 28 U.S.C. 171.

16 In April 2009 Plaintiff made an application for permit to travel to Canada. He received no  
17 Response until September 2009. At which time he was told to apply for temporary visitor  
18 Permit and application for criminal rehabilitation with fee of \$185.00. Plaintiff went into  
19 the Detroit office on January 20, 2010. to talk with some unknown officer. Who told him  
20 that he needed \$370.00 for application for authorization to return to Canada. Now anybody  
21 knows that this should have been told to Plaintiff when first applying in April 2009. This is what  
22 has happened again and again over and over for 18 years now. I pray it ends now. It is  
23 called "bait and switch" violation of Uniform Commercial Code Article 2. There was no good  
24 intent by Consulate General of Canada to ever give Plaintiff any kind of permit only to take  
25 his money as much as possible and keep him from ever seeing his children. Holding him  
26 from the border. Thereby making him a slave bound not to leave the state to far so he could one  
day see his children. Plaintiff therefore ask that Consulate General of Canada be barred from  
keeping all the fees paid since 1992 as non returnable. Where no good intent to deliver goods

1 (i.e. permits) was never meant to happen. Plaintiff ask that all Defendant's jointly and severally.  
2 Be held liable for damages to Plaintiff and his family for 18 years in the sum of \$3,000,000.00  
3 (Three Million Dollars US). Plaintiff is at the end of his rope. Physical damage was done by  
4 causing Plaintiff to lose his house in Shrewsbury, Ontario market value \$100.000.00 Can which  
5 he had to sell for \$15,000.00 Can. Three of Plaintiff children are now homeless because they  
6 have no home and their mother lives with a poor white man. So Immanuel is trying to move into  
7 a place in Chatham, Ontario now. Sophia is staying with her grandmother in Chatham, Ontario.  
8 Mark'ee is in jail. Grace and Donald want to leave but are not old enough, because their mother  
9 chooses this poor with man with his three boys over them. So Canadian Immigration has done  
10 me and my children a great deal of harm. Immanuel has a son now Dontay my grandson who's  
11 mother doesn't want him. All my children could have lived at my family home in Shrewsbury,  
12 Ontario. Canadian Immigrations owes the Child's family an unknown amount of money over  
13 \$3,000.000.00 for physical damages, which Plaintiff claims. Plaintiff has been asked by Halina  
14 Roznawski Visa Officer to provide a driving record since 16. The Secretary of State of Michigan  
15 will only go back 7years even if you write to Lansing. Will that be a reason for refusal or  
16 considered non-com-pliancy as usual? Halina Roznawski is further requesting court record from  
17 1970, 1974, 1981, and 1982 which are in a file in their office 4 inches thick with certified records  
18 (copy enclosed). She wants me to duplicate this information as a part of their cruel and unusual  
19 treatment. Plus more cost and fees. She request evidence my children live in Canada. How am I  
20 to get that and I cant go over there. She request letters from my children supporting my request  
21 to visit. Why should I have to do that seeing that I have a court order to visit them on the second  
22 weekend of every month from Friday to Sunday in Canada. Signed by Judge Lucy Glenn Ontario  
23 Court Provincial Division at 21 Seventh Street Chatham, Ontario N7M 4K1 Court File No.  
24 79/96. So it seems when the law is on Plaintiff's side it must be ignored. Plaintiff is tired of being  
25 told that he has not been rehabilitated. Plaintiff states that he knows he has been redeemed and  
26 rehabilitated because he flew to Jesus arms for relief and has been in the service of the King

1 every since Consulate General of Canada has known him since 1986. As a Soldier in The  
2 Salvation Army working in the jail and hospitals in Chatham, Ontario. Plaintiff further states  
3 that when a prisoner is at the bar he fears the impending weight not the crime, let him go and he  
4 will do it again. He knows that he got in trouble, but it was because you sent him back to Detroit  
5 where his trouble began. Because he got in trouble does not mean he's not rehabilitated. It means  
6 the Devil has attempted to take him down, yet Plaintiff has overcome and became an Ordained  
7 Minister, founded a church "Ecclesiasticus Temple Church" and has a radio broadcast every  
8 Sunday 3-3:30pm on [www.fm881whpr.com](http://www.fm881whpr.com) FM88.1 Does that sound like defeat and a hard  
9 core criminal?

10  
11  
12 February 5, 2010

13 X Rev. Karl Childs CCHS  
14 7815 Manor Cir #102  
15 Westland, MI 48185  
16 734-334-6408  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26

Stephen Torrance  
Owner / Manager



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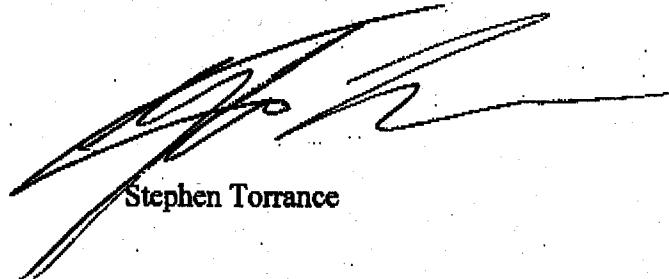
January 28, 2010

To whom it may concern,

This letter is to verify that Bartholomew Alexander passed away on January 17, 2010.

If you require any further information, do not hesitate to call me.

Sincerely,



Stephen Torrance



Government of Canada  
Consulate General of Canada

Gouvernement du Canada  
Consulat général du Canada

File: D091200027

Date: January 28, 2010

Mr. Karl Childs  
7815 Manor Circle # 102  
Westland, MI 48185

Dear Mr. Childs:

I refer to your application for a Temporary Resident Permit.

The following documents and/or information is required to continue processing your file. Please provide the documents and/or information, in one package, within 90 days from the date of this letter. If you do not provide the documents requested within 90 days, a decision will be made based on the documents on file and your case may be refused.

- Court document(s) describing charges, disposition and sentences for offences dated 2004 - Assault
- Documents confirming completion of sentence (ie. payment of fine and restitution, discharge from probation, release from prison etc.) for offences dated
  - 1970 Felonious Assault with dangerous weapon
  - 1974 Carry concealed weapon
  - 1981 Carry concealed weapon
  - 1982 Criminal sexual assault
  - 2004 Assault
  - 2005 Children - contributing to delinquency
  - 2006 Drive while license suspended
  - 2006 Disorderly conduct
- Copies of the statute (laws) under which you were convicted. Please do an internet search or visit the library or consult a lawyer.
- Evidence your children reside in Canada
- Letters from your children supporting your request to visit them in Canada.

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If requested items have not been received within 90 days from the date of this letter  
your file may be refused

Sincerely,

Halina Róznański  
Visa Officer



Feb. 27, 2008  
Rev. Karl H. Childs  
2094 S. Venoy Rd.  
Westland, MI 48186

Canadian Consulate General  
600 Renaissance Center, Suite 1100  
Detroit, MI 48243-1798

To whom it may concern: Greetings

I have a visitation order from Ontario Court Provincial Division Chatham, Ontario to visit with my five children every second weekend monthly from Friday to Sunday. Namely Immanuel Childs, Sophia Childs, Mark'ee Childs, Grace Childs, and Donald Childs.

I have not seen my children in about five or six years. I have changed my life and will be an Ordained Minister next month and I just got out of Sacred Heart Rehab Jan. 14, 2008. Please let me see my children. See enclosed copy's.

Respectfully,  
Karl Hugh Childs  
CHS

Ph. 734-722-7365

Citizenship and  
Immigration CanadaCitoyenneté et  
Immigration CanadaPAGE 1 OF/DE 3  
PROTECTED WHEN COMPLETED - B  
PROTÉGÉ UNE FOIS REMPLI**APPLICATION FOR A TEMPORARY RESIDENT VISA MADE OUTSIDE OF CANADA**  
**DEMANDE DE VISA DE RÉSIDENT TEMPORAIRE PRÉSENTÉE À L'EXTÉRIEUR DU CANADA**I want service in:  
Je veux être servi(e) en : English  
 Anglais French  
 FrançaisThis form must be completed in English or French  
Ce formulaire doit être rempli en français ou en anglais

File - Référence

1

 Single entry visa(s) requested  
Visa(s) pour un seul séjour demandé(s) Multiple entry visa(s) requested  
Visa(s) pour entrées multiples demandé(s) Transit visa(s) requested  
Visa(s) de transit demandé(s)

2

APPLICANT  
REQUÉRANTSPOUSE OR COMMON-LAW PARTNER AND CHILDREN  
CONJOINT OU CONJOINT DE FAIT ET ENFANTSFamily name  
Nom de famille

Childs

First name  
Prénom

Karl

Second name  
Autre prénom

Hugh

Relationship  
Lien de parentéSELF  
LUI-MÊMESex  
Sexe

Male

Date of birth  
Date de naissance

21/10/11/95/12

D-J M Y-A

D-J M Y-A

D-J M Y-A

Place of birth  
Lieu de naissance

Ypsilanti - MI

Citizenship  
Citoyenneté

United States

Passport no.  
N° de passeport

016387319

Passport expiry date  
Date d'expiration du passeport

05/01/2010

D-J M Y-A

D-J M Y-A

D-J M Y-A

Marital status  
État matrimonial

Divorced

Will accompany you to Canada?  
Vous accompagnera au Canada?

Self

 Yes  
Oui     No  
Non Yes  
Oui     No  
Non Yes  
Oui     No  
Non

3 The purpose of my visit to Canada is - Objet de ma visite au Canada

 Tourism  
Tourisme Business  
Affaires Other (Provide details below)  
Autre (Précisez ci-dessous)

see attached Judge Order

Visitation with children

4 Indicate how long you plan to stay in Canada

See attached Judge Order

From D-J M Y-A To D-J M Y-A

De

5 Funds available for my stay in Canada  
Ja disponible, pour mon séjour au Canada, de

► 612.00 Monthly

CDN \$  
\$ CAN

6 My current mailing address. All correspondence will go to this address unless you indicate your e-mail address below, thereby authorizing correspondence, including file and personal information, to be provided to the specified e-mail address. If you wish to authorize the release of information from your case file to a representative, indicate their address below and on the form IMM 5476.

Mon adresse postale actuelle. Toute la correspondance sera envoyée à cette adresse, sauf si vous fournissez une adresse de courriel, auquel cas la correspondance autorisée, y compris vos renseignements personnels, sera envoyée à cette adresse de courriel. Si vous désirez autoriser la transmission de renseignements concernant votre dossier à un représentant, indiquez son adresse ci-dessous et sur le formulaire IMM 5476.

7 My residential address (if different from your mailing address)  
Mon adresse personnelle (si elle est différente de votre adresse postale)2094 S. Venoy Rd.  
Westland, MI 48186E-mail  
Courriel

► karl.childs@yahoo.com

Telephone number  
Numéro de Téléphone

► 734-722-7365

Fax number  
Numéro de TélécopieurDO NOT WRITE IN THIS SPACE  
ESPACE RÉSERVÉ

Officer - Agent

Immigration status of applicant(s) in country where applying:

Statut par rapport à l'immigration du (des) requérant(s) dans le pays où la demande est présentée

b) Valid until

Valid jusqu'au

D - J M Y - A

 Citizen  
Citoyen Permanent resident  
Résident permanent Temporary Resident  
Résident Temporaire Worker  
Travailleur Student  
Étudiant

My present job (Give the job title and a brief description of your position)

Ma profession actuelle (Indiquer le titre de votre emploi et une brève description du poste)

10 Name and address of my present employer or school

Nom et adresse de mon employeur actuel ou de l'établissement d'enseignement

N/A SSI income (\$1200 month)  
See enclosed copy letter

11 Name, address and relationship of any person(s) or institution I will visit are:

Nom, adresse et lien de parenté de toute personne à qui je rendrai visite ou nom et adresse de tout établissement que je visiterai

Name - Nom

Address in Canada - Adresse au Canada

Childs Family | 5 Children See Judge Order,  
Visit at | 183 E. Wellington enclosed  
Chatham, Ontario N7M 3P2

Relationship to me - Lien de parenté

Children

12

"X" THE APPROPRIATE BOX  
INSCRIRE « X » DANS LA CASE APPROPRIÉEa) Within the past two years, have you or a family member had tuberculosis of the lung or been in close contact with a person with tuberculosis of the lung?  
Au cours des deux dernières années, avez-vous eu, vous ou un des membres de votre famille, la tuberculose pulmonaire ou été en contact avec une personne qui a la tuberculose pulmonaire? YES  
OUI  NO  
NONb) Do you or an accompanying family member have any physical or mental disorder for which that person will require social and/or health services, other than medication, during this stay?  
Avez-vous, vous ou un des membres de votre famille qui vous accompagne, un trouble physique ou mental qui nécessiterait des services sociaux et/ou des soins de santé autres que des médicaments durant le séjour? YES  
OUI  NO  
NONHave you or any member of your family ever:  
Est-ce que vous-même ou tout membre de votre famille :

Records of file in your office

c) Committed, been arrested or charged with any criminal offence in any country?  
Avez-vous commis, ou avez-vous été arrêté pour avoir commis ou accusé d'avoir commis une infraction pénale quelconque dans n'importe quel pays? YES  
OUI  NO  
NONd) Been refused admission to, or ordered to leave Canada?  
Vous a-t-on jamais refusé l'admission au Canada, ou enjoint de quitter le Canada? YES  
OUI  NO  
NONe) Applied for any Canadian immigration visas  
(e.g. Permanent Resident, Student, Worker, Temporary Resident (visitor), Temporary Resident Permit)?  
Avez-vous demandé un visa canadien auparavant?  
(par exemple, un visa de résident permanent, d'étudiant, de travailleur, de résident temporaire [visiteur] ou un permis de séjour temporaire)? YES  
OUI  NO  
NONf) Been refused a visa to travel to Canada?  
Vous a-t-on jamais refusé un visa pour le Canada? YES  
OUI  NO  
NONg) In periods of either peace or war, have you ever been involved in the commission of a war crime or crime against humanity, such as: willful killing, torture, attacks upon, enslavement, starvation or other inhumane acts committed against civilians or prisoners of war; or deportation of civilians?  
En période de paix ou de guerre, avez-vous déjà participé à la commission d'un crime de guerre ou d'un crime contre l'humanité, c'est-à-dire de tout acte inhumain commis contre des populations civiles ou des prisonniers de guerre, par exemple, l'assassinat, la torture, l'agression, la réduction en esclavage ou la privation de nourriture, etc., ou encore participé à la déportation de civils? YES  
OUI  NO  
NONIf you answer "yes" to any of the questions c) to g) above, you must provide details in the box below marked "Related Information".  
Si vous répondez « oui » à l'une ou plusieurs des questions c) à g) ci-dessus, vous devez fournir des détails dans cette case « Détails ».

Related information - Détails

See files in your office

13 During the past five years have you or any family member accompanying you lived in any other country than your country of citizenship or permanent residence for more than six months?  
Au cours des cinq dernières années, avez-vous ou n'importe quel membre de votre famille vous accompagnant a-t-il vécu dans un autre pays que votre pays de citoyenneté ou de résidence permanente pendant plus de six mois? YES  
OUI  NO  
NON

If answer to question 13 is "yes", list countries and length of stay

Si la réponse à la case 13 est affirmative, indiquer le nom de ces pays et la durée du séjour

Name Nom	Country Pays	Length of stay - Durée du séjour		
		From - De	To - A	
		D - J	M	Y - A

I declare that I have answered all questions  
in this application fully and truthfully.  
Je déclare avoir donné des réponses exactes et  
complètes à toutes les questions de la présente demande.Karl H. Childs, chts  
Signature of applicant - Signature du requérantD-J M Y-A  
27/02/2008  
Date

This form has been established by the Minister of Citizenship and Immigration

Formulaire établi par le ministre de la Citoyenneté et de l'Immigration

The information you provide on this form is collected under the authority of the  
Immigration and Refugee Protection Act to determine if you may be admitted to  
Canada as a temporary resident. It will be stored in Personal Information Bank CIC  
PPU 051, Foreign Temporary Resident Records and Case File. It is protected and  
accessible under the Privacy Act and the Access to Information Act.Les renseignements fournis sur ce formulaire sont recueillis en vertu de la Loi sur  
l'immigration et la protection des réfugiés pour déterminer si vous êtes admis au  
Canada à titre de résident temporaire. Ils seront versés au Fichier des  
renseignements personnels CIC PPU 051, Dossier et fichier de résident temporaire.  
Ils sont protégés et accessibles en vertu de la Loi sur la protection des  
renseignements personnels et de la Loi sur l'accès à l'information.

CIVIL COVER SHEET County in which action arose U.S.

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of maintaining the civil docket sheet. (SEE INSTRUCTIONS ON THE REVERSE OF THE FORM.)

<b>I. (a) PLAINTIFFS</b> <u>Rev. Karl Childs</u> <u>7815 Manor Cir #102</u> <u>Westland MI 48185</u> <b>(b) County of Residence of First Listed Plaintiff</b> _____ <small>(EXCEPT IN U.S. PLAINTIFF CASES)</small>	<b>DEFENDANTS</b> <u>Government of Canada</u> <u>Consulate General of Canada</u> <u>Suite 1100, 600 Renaissance Center</u> <u>Detroit MI 48293</u> <b>County of Residence of First Listed Defendant</b> _____ <small>(IN U.S. PLAINTIFF CASES ONLY)</small>
NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE LAND INVOLVED.	
Attorneys (If Known)	

<b>II. BASIS OF JURISDICTION</b> (Place an "X" in One Box Only)		<b>III. CITIZENSHIP OF PRINCIPAL PARTIES</b> (Place an "X" in One Box for Plaintiff and One Box for Defendant)	
<input type="checkbox"/> 1 U.S. Government Plaintiff <input type="checkbox"/> 3 Federal Question (U.S. Government Not a Party)		<input checked="" type="checkbox"/> 1 Citizen of This State <input type="checkbox"/> 2 Citizen of Another State <input type="checkbox"/> 3 Citizen or Subject of a Foreign Country <input type="checkbox"/> 4 Incorporated or Principal Place of Business In This State <input type="checkbox"/> 5 Incorporated and Principal Place of Business In Another State <input type="checkbox"/> 6 Foreign Nation	
<input type="checkbox"/> 2 U.S. Government Defendant <input checked="" type="checkbox"/> 4 Diversity (Indicate Citizenship of Parties in Item III)			

<b>IV. NATURE OF SUIT</b> (Place an "X" in One Box Only)			
<b>CONTRACT</b> <input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excl. Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise		<b>CIVIL RIGHTS</b> <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury	
<b>PERSONAL PROPERTY</b> <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input checked="" type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property		<b>PERSONAL PROPERTY</b> <input type="checkbox"/> 362 Personal Injury - Med. Malpractice <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	
		<b>PROPERTY RIGHTS</b> <input type="checkbox"/> 610 Agriculture <input type="checkbox"/> 620 Other Food & Drug <input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 630 Liquor Laws <input type="checkbox"/> 640 R.R. & Truck <input type="checkbox"/> 650 Airline Regs. <input type="checkbox"/> 660 Occupational Safety/Health <input type="checkbox"/> 690 Other	
		<b>LABOR</b> <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Mgmt. Relations <input type="checkbox"/> 730 Labor/Mgmt. Reporting & Disclosure Act <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Empl. Ret. Inc. Security Act	
		<b>SOCIAL SECURITY</b> <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIW/W (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g))	
		<b>IMMIGRATION</b> <input type="checkbox"/> 462 Naturalization Application <input type="checkbox"/> 463 Habeas Corpus - Alien Detainee <input type="checkbox"/> 465 Other Immigration Actions	
		<b>GENERAL</b> <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609	
		<b>OTHER SUBJECT MATTER</b> <input type="checkbox"/> 893 Environmental Mat	
		<input type="checkbox"/> 894 Energy Allocation A	
		<input type="checkbox"/> 895 Freedom of Information Act	
		<input type="checkbox"/> 900 Appeal of Fee Determination Under Equal Access to Justice	
		<input type="checkbox"/> 950 Constitutionality of State Statutes	

<b>V. ORIGIN</b> (Place an "X" in One Box Only)		<input checked="" type="checkbox"/> 1 Original Proceeding <input type="checkbox"/> 2 Removed from State Court <input type="checkbox"/> 3 Remanded from Appellate Court <input type="checkbox"/> 4 Reinstated or Reopened <input type="checkbox"/> 5 Transferred from another district (specify) _____ <input type="checkbox"/> 6 Multidistrict Litigation <input type="checkbox"/> 7 Appeal to Judge from Magistrate Judgment				
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<b>VI. CAUSE OF ACTION</b>		Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity): <u>The Federal Tort Claims Act 1946, 28 U.S.C. 1711</u> Brief description of cause: <u>(I T E D) (C N I E D) UCC Article 2 Wrangle</u>				
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<b>VII. REQUESTED IN COMPLAINT:</b>		<input type="checkbox"/> CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23			<b>JURY DEMAND:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
-------------------------------------	--	--	--	--	---	--

<b>VIII. RELATED CASE(S) IF ANY</b>		<small>(See instructions):</small> <u>N/A</u>			<b>DOCKET NUMBER</b> <u>TOOK WINE</u>	
-------------------------------------	--	---	--	--	---------------------------------------	--

DATE

SIGNATURE OF ATTORNEY OF RECORD

FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IFP

JUDGE

MAG. JUDGE

**PURSUANT TO LOCAL RULE 83.11**

1. Is this a case that has been previously dismissed?

Yes  
 No

If yes, give the following information:

Court: \_\_\_\_\_

Case No.: \_\_\_\_\_

Judge: \_\_\_\_\_

2. Other than stated above, are there any pending or previously discontinued or dismissed companion cases in this or any other court, including state court? (Companion cases are matters in which it appears substantially similar evidence will be offered or the same or related parties are present and the cases arise out of the same transaction or occurrence.)

Yes  
 No

If yes, give the following information:

Court: \_\_\_\_\_

Case No.: \_\_\_\_\_

Judge: \_\_\_\_\_

Notes :

\_\_\_\_\_